

12 pt. 8-18-15

Given at
SPED MTG.

Initial IEP (IEP)
 Annual Review (RIEP)
 New Student Transfer IEP
**Massillon City Schools Special Services
IEP Checklist**

Student:	Grade:	School:
SPED Case Manager:	Handicap Condition:	
Notes:		

Please locate areas indicated as needed to correct before this document is used for amendment must be written.

FRONT PAGE

SECTION 1 – FUTURE PLANNING

- Interests of Student
- Skills of Student
- Lists student/parent wishes after high school
- Coursework, job coaching programs will assist student with goals

SECTION 2 – SPECIAL INSTRUCTIONAL FACTORS

- Each box is checked YES or NO
- If YES, a goal is created for the student addressing this factor.

SECTION 4 & 5 – POSTSECONDARY TRANSITION

- Is the child 14 within the duration of the IEP? If YES – read on...
- Child's courses of study (general curriculum, vocational curriculum)
- Where the student is progressing to (college prep, vocational)
- Attendance, work experience, interest inventories, etc.

SECTION 3 - PROFILE

- Summarize strengths of child
- Describe how disability affects progress in general curriculum as compared to typical peers.
- Academic, developmental and functional needs of child
- Results of state or district-wide assessments and recent evaluations

SECTION 6 – MEASURABLE ANNUAL GOALS

- Present levels and baseline information

Measurable Annual Goal has:

1. Condition (situation, setting or given material)
2. Clearly defined behavior (action)
3. Criteria of mastery
4. How frequently the teacher will assess the mastery of skills

Method for measuring is addressed from list

Measurable Objectives include:

1. Plan for reaching annual goal and means of measuring progress toward the goal
2. Include condition, clearly defined behavior and performance criteria

Method and Frequency for Reporting Progress at least as often as general education students.

SECTION 7 – DESCRIPTIONS OF SPECIALLY DESIGNED SERVICES

- Special Designed Instruction: Adapting content, methodology or delivery of instruction to access the general curriculum
- Related Services
 - Transportation – if marked in Section 8 needs to be here also
 - Speech & Language, OT, PT, etc.
 - Each Service has own box
- Assistive Technology
 - Accommodations: Providing access to, not altering amount or complexity; Testing accommodations for all tests INCLUDING Statewide/District Wide Testing (Section 12)
 - Modifications: Reserved for MH students where curriculum and delivery is modified
 - Support for School Personnel: Training, aide, resource materials, equipment consultations
 - Services to support Medical Needs: Medical services medication, feedings

SECTION 8 – TRANSPORTATION AS A RELATED SERVICE

- Transportation is marked YES – It is reflected in Section 7: Related Service

SECTION 9 – NONACADEMIC AND EXTRACURRICULAR ACTIVITIES

- Document opportunities to participate in clubs, activities, etc.

(Over)

SECTION 10 - GENERAL FACTORS IEP considerations marked YES or NO ESy is indicated**SECTION 11 - LEAST RESTRICTIVE ENVIRONMENT** Participation is marked YES or NO

If NO, justification is indicated.

SECTION 12 - STATEWIDE AND DISTRICTWIDE TESTING Participation is marked YES or NO

If "with accommodations" marked, accommodations are reflected in Section 7: Accommodations

 Alternate Assessment marked YES or NO Met Testing Requirement indicated**SECTION 13 - MEETING PARTICIPANTS** Type of Meeting and Dates

IEP meeting participants including parent, district rep, intervention specialist and general education teacher

SECTION 14 - SIGNATURES Appropriate box signed by parent/guardian PR-01 Sent to Parent if Parent did not attend Transfer of Rights at Majority, if appropriate

Procedural Safeguards Notice marked

 Copy of IEP marked**EMIS** Student Info Tab: Autism Scholarship?, Case Manager

Disability Tab: Disability Input

 Events Tab: Event, Event (Meeting Date), Outcome ID, Non-Compliance ID, Start and End Date, IEP Test Type, Secondary

Planning

 Programs Tab: Related Services with Dates Indicated

District Representative Signature and Date

Date Emailed Teacher for Correction (cc: Elaine) (if this is only required action):

PRO1 No PRO1 with IEP.

Date of Notice Wrong. Cannot date and send out before meeting date.

Section #2 has IEP effective date before Date of Notice. (The IEP is not in effect until the notice is sent out; therefore the effective date in #2 is wrong). Change the PRO1's Date of Notice as same date as effective date of IEP.

REQUIRED ACTIONS IEP Amendment to correct and resubmit Submit Parent Invite Form/Documentation of Attempts Correct and return; send parent corrected page(s) Submit Progress Report Reconvene IEP Meeting and Resubmit PRO1 Correction Needed Submit Closed Out IEP Page with Sticker Submit Corrected EMIS Form

Special Services Signature

Date

FOR SPECIAL SERVICES OFFICE ONLY**ELIZABETH'S CHECKLIST OF ITEMS RECEIVED** Closed Out IEP Page with Sticker Approved and Emailed OK to Complete Date: Progress Report Documentation of Attempts Invitation (PR-02) PR-01